

# **ASAP.GOV Participation Request**

## **AGENCY INFORMATION**

**United States Department of the Interior**  
NATIONAL PARK SERVICE  
12795 W Alameda Pkwy  
P.O. Box 25287  
Attn: Leah Weakland (FBMS)  
Denver, CO 80225-0287

**EMAIL ASAP\_Enrollment@nps.gov**

**NPS Contacts For ASAP Enrollment: Leah Weakland 303-969-2046**

**Fields marked with \* are required. Failure to provide required data may result in delayed enrollment.**

## **Organization Information**

*Organization Name:	
*DUNS: Nine Digit Number	
*TIN/EIN: Nine Digit Number	
ASAP ID: (If applicable)	
*Mailing Address:	
*City:	
*State:	
*Zip Code:	
*Phone:	

## **Point of Contact Information**

*First Name:	
Middle Initial:	
*Last Name:	
Title:	
*Email:	

## **\* Organization Type (choose one)**

- ☐ Financial Institution
- ☐ For-Profit
- ☐ Indian Tribal Organization
- ☐ Local Government
- ☐ Non-Profit
- ☐ Other Educational Organization
- ☐ State Agency
- ☐ University / College
- ☐ University / College - State

EMAIL/MAIL completed form to the address at the top of this form.